



11-19-04

E0546076684 Ifw

Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/611,599
	Filing Date	Jul 01, 2003
	First Named Inventor	Miller
	Group Art Unit	2142
	Examiner Name	
Total Number of Pages in This Submission	Attorney Docket Number	MS1-1527US

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) Sheets <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO Form 1449 and 4 Cited References Return Post Card
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Damon A. Rieth
Signature	<i>Damon A. Rieth for Reg # 44302</i>
Date	11/18/04

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that the items listed above as enclosed are being deposited with the U.S. Postal Service as Express Mail, in an envelope addressed to The Commissioner of Patents, Alexandria, VA 22313 on the below-indicated date. The Express Mail No. has also been marked on the listed items. Express Mail No.	
Typed or printed name	LeAnn M. Sassman
Signature	<i>LeAnn M. Sassman</i>
Date	11/18/04

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EV 546076684

PTO/SB/17 (10-04)

Approved for use through 07/31/2006. OMB 0651-0032  
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# FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$0)

## Complete if Known

Application Number 10/611,599  
 Filing Date 7/1/2003  
 First Named Inventor David Michael Miller  
 Examiner Name  
 Art Unit 2142  
 Attorney Docket No. MS1.1527US

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money ☐ Other ☐ None  
 Order
☒ Deposit Account:
 Deposit  
 Account  
 Number  
 Deposit  
 Account  
 Name

12-0769

Lee &amp; Hayes, PLLC

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) during the pendency of this application.☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1001 790	2001 395	Utility filing fee
1002 350	2002 175	Design filing fee
1003 550	2003 275	Plant filing fee
1004 790	2004 395	Reissue filing fee
1005 160	2005 80	Provisional filing fee

Fee Paid

SUBTOTAL (1)

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims	-20 =	x 18	=
Indep. Claims	-3 =	x 88	=
Multiple Dependent			=

Large Entity Small Entity

Fee Fee Fee Fee

Code (\$)

1202 18 2202 9

1201 88 2201 44

1203 300 2203 150

1204 88 2204 44

1205 18 2205 9

Fee Description

Claims in excess of 20

Independent claims in excess of 3

Multiple dependent claim, if not paid

\*\* Reissue independent claims

over original patent

\*\* Reissue claims in excess of 20

and over original patent

SUBTOTAL (2) \$

\*\*or number previously paid, if greater; For Reissues, see above.

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity Small Entity

Fee Fee Fee Fee

Code (\$)

1051 130 2051 65

1052 50 2052 25

1053 130 2053 130

1812 2,520 2052 2,520

1804 920\* 2052 920\*

1805 1,840\* 2052 1,840\*

1251 110 2251 55

1252 430 2252 215

1253 980 2253 490

1254 1,530 2254 765

1255 2,080 2255 1,040

1401 340 2401 170

1402 340 2402 170

1403 300 2403 150

1451 1,510 2451 1,510

1452 110 2452 55

1453 1,330 2453 665

1501 1,370 2501 685

1502 490 2502 245

1503 660 2503 330

1460 130 2460 130

1807 50 2807 50

1806 180 2806 180

8021 40 8021 40

1809 790 2809 395

1810 790 2810 395

1801 790 2801 395

1802 900 2802 900

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

Fee Paid

## SUBMITTED BY

## Complete (if applicable)

Name (Print/Type)	Damon A. Rieth	Registration No. (Attorney/Agent)	52167	Telephone	509-324-9256
Signature	<i>Damon A. Rieth</i>	Date	11/18/2004		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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EV 546076684

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No. ....10/611,599  
Filing Date ..... Jul 01, 2003  
Confirmation No. ....6158  
Inventor..... Miller et al.  
Applicant ..... Microsoft Corporation  
Group Art Unit .....2142  
Examiner .....  
Attorney's Docket No. .... MS1-1527US  
Title: Instant Messaging Object Store

**INFORMATION DISCLOSURE STATEMENT AND**  
**CERTIFICATION UNDER 37 CFR 1.97(e)**

The citations listed, copies attached, may be material to the examination of the subject application and are therefore submitted in compliance with the duty of disclosure defined in 37 CFR §1.56. The Examiner is requested to make these citations of official record in this application.

I hereby certify that to my knowledge, after reasonable inquiry, that each item of information contained in the information disclosure statement was cited in a communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of the statement.

Furthermore, each item of information contained in the information disclosure statement was cited in a communication from a foreign patent office in a counterpart application and this communication was not received by any individual designated in §1.56(c) more than thirty days prior to the filing of the information disclosure statement.

Respectfully Submitted,

Date: 11/18/04

By: Damon A. Rieth for Reg.#  
Damon A. Rieth 44302  
Reg. No. 52,167

+

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